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Approved for use through 9/30/00. OMB 0651-0037  
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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

|  |                 |                        |          |
|--|-----------------|------------------------|----------|
| Application Number                       | 09/826,383      |                        |          |
| Filing Date                              | 4 April 2001    |                        |          |
| First Named Inventor                     | Yoshida, et al. |                        |          |
| Group Art Unit                           |                 |                        |          |
| Examiner Name                            |                 |                        |          |
| Total Number of Pages in This Submission | 100             | Attorney Docket Number | 0694-143 |

### ENCLOSURES (check all that apply)

|   |   |  |
|---|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form  | <input checked="" type="checkbox"/> Assignment Papers<br>(for an Application)           | <input type="checkbox"/> After Allowance Communication to Group                            |
| <input checked="" type="checkbox"/> Fee Attached  | <input type="checkbox"/> Drawing(s)   | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences        |
| <input type="checkbox"/> Amendment / Response   | <input type="checkbox"/> Licensing-related Papers                                       | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final  | <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition    | <input type="checkbox"/> Proprietary Information   |
| <input type="checkbox"/> Affidavits/declaration(s)  | <input type="checkbox"/> To Convert a Provisional Application                           | <input type="checkbox"/> Status Letter   |
| <input type="checkbox"/> Extension of Time Request  | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input checked="" type="checkbox"/> Additional Enclosure(s)<br>(please identify below):    |
| <input type="checkbox"/> Express Abandonment Request  | <input type="checkbox"/> Terminal Disclaimer  | <b>SEE REMARKS BELOW</b>   |
| <input type="checkbox"/> Information Disclosure Statement   | <input type="checkbox"/> Small Entity Statement   |  |
| <input checked="" type="checkbox"/> Certified Copy of Priority Document(s)  | <input type="checkbox"/> Request for Refund   |  |
| <input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application   |   |  |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53  |   |  |
| Remarks   |   |  |
| Declaration and Power of Attorney for Patent Application; Priority Application Nos. 2000-101895, 2000-340406, 2000-342789, 2000-342835; Pat. No. WO 01/54145 A1 |   |  |

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### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|                         |                  |                         |
|-------------------------|------------------|-------------------------|
| Firm or Individual name | Bradley N. Ruben | Registration No. 32,058 |
| Signature               |                  |                         |
| Date                    | 31 August 2001   |                         |

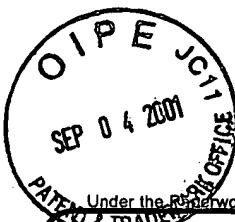
### CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

Typed or printed name

Signature Date 31 August 2001

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PTO/SB/17 (11-00)  
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# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT** (\$ 1,836.00)

## Complete if Known

|                      |                 |
|----------------------|-----------------|
| Application Number   | 09/826,383      |
| Filing Date          | 4 April 2001    |
| First Named Inventor | Yoshida, et al. |
| Examiner Name        |                 |
| Group Art Unit       | 2815            |
| Attorney Docket No.  | 0694-143        |

## METHOD OF PAYMENT

1.  The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **08-2776**  
Deposit Account Name **Hopgood, Calimafde, et al**

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2.  Payment Enclosed:

Check  Credit card  Money Order  Other

## FEE CALCULATION

### 1. BASIC FILING FEE

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description               | Fee Paid |
|----------------------------|----------------------------|-------------------------------|----------|
| 101                        | 710                        | 201 355 Utility filing fee    | 710.00   |
| 106                        | 320                        | 206 160 Design filing fee     |          |
| 107                        | 490                        | 207 245 Plant filing fee      |          |
| 108                        | 710                        | 208 355 Reissue filing fee    |          |
| 114                        | 150                        | 214 75 Provisional filing fee |          |

**SUBTOTAL (1) (\$ 710.00)**

### 2. EXTRA CLAIM FEES

| Total Claims       | 42 | -20** = 22 | Fee from below | Fee Paid |
|--------------------|----|------------|----------------|----------|
| Independent Claims | 10 | - 3** = 7  | X 18.00        | = 396.00 |
| Multiple Dependent |    |            | X 80.00        | = 560.00 |

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description  |
|----------------------------|----------------------------|--|
| 103                        | 18                         | 203 9 Claims in excess of 20                                     |
| 102                        | 80                         | 202 40 Independent claims in excess of 3                         |
| 104                        | 270                        | 204 135 Multiple dependent claim, if not paid                    |
| 109                        | 80                         | 209 40 ** Reissue independent claims over original patent        |
| 110                        | 18                         | 210 9 ** Reissue claims in excess of 20 and over original patent |

**SUBTOTAL (2) (\$ 956.00)**

*\*\*or number previously paid, if greater; For Reissues, see above*

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

| Large Entity Fee Code (\$)                   | Small Entity Fee Code (\$) | Fee Description   | Fee Paid |
|--|----------------------------|---|----------|
| 105  | 130                        | 205 65 Surcharge - late filing fee or oath  | 130.00   |
| 127  | 50                         | 227 25 Surcharge - late provisional filing fee or cover sheet                     |          |
| 139  | 130                        | 139 130 Non-English specification   |          |
| 147  | 2,520                      | 147 2,520 For filing a request for ex parte reexamination                         |          |
| 112  | 920*                       | 112 920* Requesting publication of SIR prior to Examiner action                   |          |
| 113  | 1,840*                     | 113 1,840* Requesting publication of SIR after Examiner action                    |          |
| 115  | 110                        | 215 55 Extension for reply within first month                                     |          |
| 116  | 390                        | 216 195 Extension for reply within second month                                   |          |
| 117  | 890                        | 217 445 Extension for reply within third month                                    |          |
| 118  | 1,390                      | 218 695 Extension for reply within fourth month                                   |          |
| 128  | 1,890                      | 228 945 Extension for reply within fifth month                                    |          |
| 119  | 310                        | 219 155 Notice of Appeal  |          |
| 120  | 310                        | 220 155 Filing a brief in support of an appeal                                    |          |
| 121  | 270                        | 221 135 Request for oral hearing  |          |
| 138  | 1,510                      | 138 1,510 Petition to institute a public use proceeding                           |          |
| 140  | 110                        | 240 55 Petition to revive - unavoidable   |          |
| 141  | 1,240                      | 241 620 Petition to revive - unintentional  |          |
| 142  | 1,240                      | 242 620 Utility issue fee (or reissue)  |          |
| 143  | 440                        | 243 220 Design issue fee  |          |
| 144  | 600                        | 244 300 Plant issue fee   |          |
| 122  | 130                        | 122 130 Petitions to the Commissioner   |          |
| 123  | 50                         | 123 50 Processing fee under 37 CFR 1.17(q)  |          |
| 126  | 180                        | 126 180 Submission of Information Disclosure Stmt                                 |          |
| 581  | 40                         | 581 40 Recording each patent assignment per property (times number of properties) | 40.00    |
| 146  | 710                        | 246 355 Filing a submission after final rejection (37 CFR § 1.129(a))             |          |
| 149  | 710                        | 249 355 For each additional invention to be examined (37 CFR § 1.129(b))          |          |
| 179  | 710                        | 279 355 Request for Continued Examination (RCE)                                   |          |
| 169  | 900                        | 169 900 Request for expedited examination of a design application                 |          |
| Other fee (specify) Advance Order (3 copies) |                            |   |          |
| <b>SUBTOTAL (3) (\$ 170.00)</b>              |                            |   |          |

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3) (\$ 170.00)**

## SUBMITTED BY

|                   |                         |                                   |        |           |                |
|-------------------|-------------------------|-----------------------------------|--------|-----------|----------------|
| Name (Print/Type) | Bradley N. Ruben        | Registration No. (Attorney/Agent) | 32.058 | Telephone | (212) 551-5000 |
| Signature         | <i>Bradley N. Ruben</i> |                                   |        | Date      | 31 August 2001 |

Complete (if applicable)

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

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09/09/2001 TUESDAY 09:00:00 1998-03-03